



U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

FORM

MA-10000(S) (10-27-2008)

2008 ANNUAL SURVEY OF MANUFACTURES

OMB No. 0607-0449: Approval Expires 10/31/2011

Mail your completed form to:
U.S. CENSUS BUREAU
1201 East 10th Street
Jeffersonville, IN 47132-0001

Please read the accompanying instructions before answering the questions.

Need help or have questions about filling out this form?

Visit our Web site at
www.census.gov/econhelp

Call:

- OR -

Write to the address above.
Include your 11-digit Census File Number (CFN) printed in the mailing address.

**INFORMATION COPY
DO NOT USE TO REPORT**

(Please correct any errors in this mailing address.)

YOUR RESPONSE IS REQUIRED BY LAW. Title 13, United States Code, requires businesses and other organizations that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, **YOUR CENSUS REPORT IS CONFIDENTIAL.** It may be seen only by persons sworn to uphold the confidentiality of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.

- Use blue or black ink.
- Please center numbers in their respective boxes. Examples:
- Do not use pencil.
- Do not put slashes through 0 or 7.
- Place an "X" inside the box.
- Complete only the unshaded portion of each item.



0 1 2 3 4 5 6 7 8 9

The reporting unit for this form is an **establishment** which is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).

1 EMPLOYER IDENTIFICATION NUMBER

Are the last 5 digits of the Employer Identification Number (EIN) shown in the mailing address the same as the last 5 digits of the EIN used for this establishment on its latest 2008 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?

0021 ☐ Yes - Go to 2

0022 ☐ No - Enter current EIN (9 digits)

0025

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2 PHYSICAL LOCATION

A. Is this establishment's physical location the same as shown in the mailing address? (P.O. Box and rural route addresses are not physical locations.)

0031 ☐ Yes - Go to line B

0032 ☐ No - Enter physical location

0035 Number and street

0036 City, town, village, etc.

0037 State

0038 ZIP Code

B. Is this establishment physically located inside the legal boundaries of the city, town, village, etc.? (Mark "X" only ONE box.)

0041 ☐ Yes

0042 ☐ No

0043 ☐ No legal boundaries

0044 ☐ Do not know

C. In what type of municipality is this establishment physically located? (Mark "X" only ONE box.)

0046 ☐ City, village, or borough

0047 ☐ Town or township

0048 ☐ Other

0024 ☐ Do not know

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

3 OPERATIONAL STATUS

Which of the following best describes this establishment's operational status at the end of 2008?
(Mark "X" only ONE box.)

- 0011 ☐ In operation
- 0016 ☐ Under construction, development, or exploration
- 0013 ☐ Temporarily or seasonally inactive

- 0014 ☐ Ceased operation - Give date at right —————→
- 0015 ☐ Sold or leased to another operator - Give date at right AND
enter name and address of new owner or operator and
Employer Identification Number (EIN) below ↴

0018	Month	Day	Year

0060 Name of new owner or operator	0061 EIN (9 digits)		
		-	
0062 Mailing address (Number and street, P.O. Box, etc.)			
0063 City, town, village, etc.	0064 State	0065 ZIP Code	
			-

4 MONTHS IN OPERATION

Mark "X" if None 2008 Number

Number of months in operation during 2008 (If none, mark "X" and go to 30.) 0002 ☐

HOW TO
REPORT
DOLLAR
FIGURES

Dollar figures should be **rounded to thousands** of dollars.

If a figure is **\$1,025,628.79**:

Report —————→ ☐

If a value is "0" (or less than \$500.00):

Report —————→ ☒

Mark "X" if None

2008		
\$ Bil.	Mil.	Thou.
	1 0 2 6	

5 SALES, SHIPMENTS, RECEIPTS, OR REVENUE

Mark "X" if None

Total value of products shipped and other receipts (Report detail in 22.) 0100 ☐

2008			2007
\$ Bil.	Mil.	Thou.	\$ Thou.

6 E-SHIPMENTS

A. Did this plant use any electronic network to control or coordinate the flow of any of the shipments of goods reported in 5? Or, were the orders for any of the shipments reported in 5 received over an electronic network?

Electronic networks include:

- Electronic Data Interchange (EDI)
- Extranet
- E-mail
- Other online systems
- Internet

0181 ☐ Yes - Go to line B

0182 ☐ No - Go to 7

B. Percent of total reported in 5 that were ordered, or whose movement was controlled or coordinated over electronic networks (Report whole percents. Estimates are acceptable.) 0109

2008	2007
Percent	Percent

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

7 EMPLOYMENT AND PAYROLL**Include:**

- Full- and part-time employees working at this establishment whose payroll was reported on Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return, and filed under the Employer Identification Number (EIN) shown in the mailing address or corrected in ①.

Exclude:

- Full- or part-time leased employees whose payroll was filed under an employee leasing company's EIN.
- Temporary staffing obtained from a staffing service.

For further clarification, see information sheet(s).

A. Number of employees

Mark "X"
if None

1. Number of production workers for pay period including March 12 0325 ☐
2. All other employees for pay period including March 12 0353 ☐
3. **TOTAL**(Add lines A1 and A2) 0356 ☐

2008			2007
Number			Number

B. Payroll before deductions (Exclude employer's cost for fringe benefits.)

Mark "X"
if None

1. Annual payroll 0300 ☐
2. First quarter payroll (January-March 2008) 0310 ☐

2008			2007
\$ Bil.	Mil.	Thou.	\$ Thou.

8 Not Applicable.**9 INVENTORIES**

Report total inventories, regardless of where held, before Last-in, First-out adjustments (if any) owned by this establishment as of December 31. Include finished goods, work-in-process, materials, supplies, fuels, etc. 0460

Mark "X"
if None

End of 2008		
\$ Bil.	Mil.	Thou.

Mark "X"
if None

End of 2007		
\$ Bil.	Mil.	Thou.

10-12 Not Applicable.**13 CAPITAL EXPENDITURES**

(Refer to the instructions on how to report leasing arrangements.)

Report the dollar value of capital expenditures. (Do not include land.)

Total capital expenditures for new and used buildings, machinery and equipment 0520

Mark "X"
if None

2008			2007
\$ Bil.	Mil.	Thou.	\$ Thou.

14 RENTAL PAYMENTS

(Exclude capital leases. Include operating leases.)

Total costs for rental or lease of buildings and equipment (Including portable structures, machinery, tools, office equipment, vehicles, and other tangible items used at this establishment.) 0550

Mark "X"
if None

2008			2007
\$ Bil.	Mil.	Thou.	\$ Thou.

15 Not Applicable.**16 SELECTED EXPENSES AND DEPRECIATION**

A. Cost of materials, parts, containers, packaging, etc., used; cost of products bought and sold without further processing; cost of purchased fuels consumed for heat, power, or the generation of electricity; cost of purchased electricity; and cost of work done for you by others on your materials 0420

Mark "X"
if None

2008			2007
\$ Bil.	Mil.	Thou.	\$ Thou.

B. Depreciation charges for all capital equipment 0540

17-21 Not Applicable.

CONTINUE ON NEXT PAGE

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

If you cannot locate the description of any products that you produce, please enter a description of your products in column (a) and enter their value in column (c). If additional lines are needed please use the "REMARKS" section. Report separately for each major kind of product. Include the value of products exported and interplant transfers in the appropriate product line(s).

An asterisk (*) at the end of a description denotes a comparability with products collected on a Current Industrial Report (CIR) questionnaire. To determine the applicable CIR, go to <http://www.census.gov/mcd/asm/prodclasscomp.html> to view the CIR Product Class Comparability page. For item code references, see paragraph on "Comparability" in Part C of the respective CIR instruction manual.

Enter TOTAL value of shipments under code 7700000.

Products and services (a)	Product Class code (b)	Products shipped and other receipts, including interplant transfers and exports			
		2008 (c)			2007 (d)
		\$ Bil.	Mil.	Thou.	\$ Thou.
	018				
	026				
	034				
	042				
	059				
	067				
	075				
	083				
	091				
	109				

10001048



CONTINUE ON NEXT PAGE

If not shown, please enter your 11-digit Census File Number (CFN) from the mailing address.

23-29 Not Applicable.

REMARKS (Please use this space for any explanations that may be essential in understanding your reported data.)

30 CERTIFICATION - This report is substantially accurate and was prepared in accordance with the instructions.

Is the time period covered by this report a calendar year?

☐ Yes

☐ No - Enter time period covered →

FROM

Month

Year

TO

Month

Year

Name of person to contact regarding this report

Title

Telephone

Area code

Number

Extension

Fax

Area code

Number

Internet e-mail address

Date completed

Month

Day

Year

Thank you for completing your 2008 ANNUAL SURVEY OF MANUFACTURES form.

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.

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